
State: District of Columbia **First Filing Company:** Erie Insurance Company, ...
TOI/Sub-TOI: 16.0 Workers Compensation/16.0004 Standard WC
Product Name: WC 10-1-15 Home Office Pages
Project Name/Number: WC 10-1-15 Home Office Pages/DCW1-1015HO

Filing at a Glance

Companies: Erie Insurance Company
Erie Insurance Company of New York
Erie Insurance Exchange
Erie Insurance Property and Casualty Company
Flagship City Insurance Company

Product Name: WC 10-1-15 Home Office Pages

State: District of Columbia

TOI: 16.0 Workers Compensation

Sub-TOI: 16.0004 Standard WC

Filing Type: Rate/Rule

Date Submitted: 09/01/2015

SERFF Tr Num: ERGP-130228191

SERFF Status: Assigned

State Tr Num:

State Status:

Co Tr Num: DCW1-1015HO

Effective Date 10/01/2015

Requested (New):

Effective Date 10/01/2015

Requested (Renewal):

Author(s): Craig Ebinger, Mary Kate Vitale

Reviewer(s): Monica Myers (primary)

Disposition Date:

Disposition Status:

Effective Date (New):

Effective Date (Renewal):

State: District of Columbia
TOI/Sub-TOI: 16.0 Workers Compensation/16.0004 Standard WC
Product Name: WC 10-1-15 Home Office Pages
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First Filing Company: Erie Insurance Company, ...

General Information

Project Name: WC 10-1-15 Home Office Pages

Project Number: DCW1-1015HO

Reference Organization:

Reference Title:

Filing Status Changed: 09/02/2015

State Status Changed:

Created By: Mary Kate Vitale

Corresponding Filing Tracking Number:

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Submitted By: Mary Kate Vitale

Filing Description:

September 1, 2015

Mr. Chester McPherson,
Insurance Commissioner
Department of Insurance, Securities and Banking
Insurance Products Division
810 First Street, N.E., STE 701
Washington, DC 20002

Attention: Mr. Robert Nkojo,
Actuarial Supervisor

SUBJECT:Filing Revised Home Office Pages
Workers Compensation
DCW1-1015HO
Group #0213
Erie Insurance Exchange - NAIC No. 26271
Erie Insurance Company – NAIC No. 26263
Erie Insurance Property and Casualty Company – NAIC 26830
Erie Insurance Company of New York – NAIC 16233
Flagship City – NAIC 35585

Dear Mr. Nkojo:

We ask you to approve our filing to revise Home Office pages for Workers Compensation and Employers Liability policies to be effective October 1, 2015.

We have changed the Schedule Rating Plan amount minimum for experience rating to match the NCCI rule. We will now use estimated annual manual premium instead of annual standard premium.

If you have any questions, please call at 800/458-0811, extension 4548. Thank you.

Sincerely,

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ERIE INSURANCE EXCHANGE

ERIE INDEMNITY COMPANY

Attorney-in-Fact

Craig C. Ebinger
Product Development Specialist
Property/Casualty Section
Product Development Department
Craig.Ebinger@erieinsurance.com

Company and Contact

Filing Contact Information

Craig C Ebinger, Product Development Specialist II	Craig.ebinger@erieinsurance.com
100 Erie Insurance Place	800-458-0811 [Phone] 4548 [Ext]
Erie, PA 16531	814-461-4383 [FAX]

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Filing Company Information

Erie Insurance Company	CoCode: 26263	State of Domicile:
100 Erie Insurance Place	Group Code: 213	Pennsylvania
Erie, PA 16530	Group Name:	Company Type:
(800) 458-0811 ext. [Phone]	FEIN Number: 25-1232960	Property/Casualty
		State ID Number:

Erie Insurance Company of New York	CoCode: 16233	State of Domicile:
100 Erie Insurance Place	Group Code: 213	Pennsylvania
Erie, PA 16530	Group Name:	Company Type:
(800) 458-0811 ext. [Phone]	FEIN Number: 16-0377190	Property/Casualty
		State ID Number:

Erie Insurance Exchange	CoCode: 26271	State of Domicile:
100 Erie Insurance Place	Group Code: 213	Pennsylvania
Erie, PA 16530	Group Name:	Company Type:
(814) 458-0811 ext. [Phone]	FEIN Number: 25-6038677	Property/Casualty
		State ID Number:

Erie Insurance Property and Casualty Company	CoCode: 26830	State of Domicile:
100 Erie Insurance Place	Group Code: 213	Pennsylvania
Erie, PA 16530	Group Name:	Company Type:
(800) 458-0811 ext. [Phone]	FEIN Number: 25-1706111	Property/Casualty
		State ID Number:

Flagship City Insurance Company	CoCode: 35585	State of Domicile:
100 Erie Insurance Place	Group Code: 213	Pennsylvania
Erie, PA 16530	Group Name:	Company Type:
(800) 458-0811 ext. [Phone]	FEIN Number: 25-1675935	Property/Casualty
		State ID Number:

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

SERFF Tracking #:	ERGP-130228191	State Tracking #:		Company Tracking #:	DCW1-1015HO
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Rate Information

Rate data does NOT apply to filing.

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Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		Home Office Pages		Replacement		DC WC Home Office Pages Eff 2015-10-01.pdf

WORKERS COMPENSATION AND EMPLOYERS LIABILITY**SCHEDULE RATING PLAN**

1. This plan is available to any risk whose estimated annual **manual** premium is equal to or greater than the minimum for experience rating eligibility.
2. Subject to a maximum modification of a 25% credit or a 25% debit, the premium for a risk may be modified in accordance with the following table to reflect such characteristics of the risk that are not reflected in its experience.

SCHEDULE RATING TABLE	
Risk Characteristics	Range of Modifications
Premises	+10% to -10%
Classification Peculiarities	+10% to -10%
Medical Facilities	+5% to -5%
Safety Devices	+5% to -5%
Employees - Selection, training, supervision	+10% to -10%
Management - Cooperation with Insurance Carrier	+5% to -5%
Management - Safety Organization	+5% to -5%

3. The amount of schedule credit or debit shall be applied to an experience rated risk, if applicable, in a multiplicative manner, after the application of the experience modification, and before the application of premium discounts and expense constant.
4. There shall be an annual report to the National Council on Compensation Insurance illustrating the total dollar amount of schedule debits and the total dollar amount of schedule credits.
5. Standard earned premium figures reported to the National Council on the aggregate calls for experience (e.g., policy year, calendar year, etc.) must exclude (i.e., be prior to) the effects of schedule rating premium adjustments. Net earned premium reported on these calls must include (i.e., be after) the effects of schedule rating premium adjustments.

Schedule rating premium adjustments must be reported under unique statistical codes on unit statistical reports submitted to the National Council.

6. This program is not applicable to residual market policyholders covered under the Workers Compensation Insurance Plan.
7. All schedule debits and all schedule credits shall be based on evidence that is contained in the file of the carrier at the time the schedule debit or credit is applied.
8. The effective date of any schedule debit or credit shall not be any date prior to the receipt in the insurer's office of the evidence supporting the debit or credit.
9. The derivation of the schedule rating factor must be made available to the insured upon request. To the degree that the insured can correct the reason for any schedule debit to the satisfaction of the insurer, the debit may be removed effective the date documentation for the correction is received in the insurer's office.
10. The Schedule Rating Program can be used only on risks which are rate in compliance with the National Council on Compensation Insurance's filed and approved rates without deviation.

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Supporting Document Schedules

Bypassed - Item:	Consulting Authorization
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (P&C)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	